

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/3/02
2	✓	✓	7/17/02
3	✓	✓	8/13/03
4	✓	✓	9/10/04
5	N	N	N
6	↑	↑	↑
7			
8			
9			
10			
11			
12	✓	✓	✓
13	N	N	N
14	✓	✓	✓
15	N	N	N
16	✓	✓	✓
17	✓	✓	✓
18	N	N	N
19	↑	↑	↑
20			
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45			
46			
47			
48			
49	✓	✓	✓
50	÷	N	N

Claim	Final	Original	Date
51	-	✓	7/3/02
52	✓	✓	7/17/02
53	N	N	N
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97			
98			
99	✓		
100	÷	N	N

Claim	Final	Original	Date
101	-	✓	7/3/02
102	✓	✓	7/17/02
103			
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133		↑	↑
134			
135			
136			
137			
138			
139			
140			
141		✓	✓
142		N	N
143		✓	✓
144		✓	✓
145			
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If more than 150 claims or 10 actions  
staple additional sheet here

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